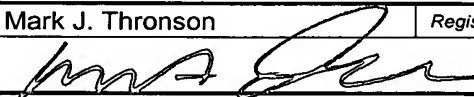


|  |   |  |  |
|--|---|--|--|
| <b>UTILITY<br/>PATENT APPLICATION<br/>TRANSMITTAL</b><br><br><i>(Only for new nonprovisional applications under 37 CFR 1.53(b))</i>  |   | <b>Attorney Docket No.</b> U2054.0145<br><b>First Inventor</b> Yoshinori Watanabe<br><b>Title</b> RECEPTION DETERMINATION METHOD AND SYSTEM OF RAY, AND RADIO WAVE PROPAGATION CHARACTERISTIC<br><b>Express Mail Label No.</b>   |  |
| <b>APPLICATION ELEMENTS</b><br><i>See MPEP chapter 600 concerning utility patent application contents.</i>   |   | <b>ADDRESS TO:</b> MS Patent Application<br>Commissioner for Patents<br>P.O. Box 1450<br>Alexandria, VA 22313-1450   |  |
| 1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17)<br><i>(Submit an original, and a duplicate for fee processing)</i><br>2. <input type="checkbox"/> Applicant claims small entity status.<br><i>See 37 CFR 1.27.</i><br>3. <input checked="" type="checkbox"/> Specification [Total Pages <b>82</b> ]<br><i>(preferred arrangement set forth below)</i><br>- Descriptive title of the invention<br>- Cross Reference to Related Applications<br>- Statement Regarding Fed sponsored R & D<br>- Reference to sequence listing, a table, or a computer program listing appendix<br>- Background of the Invention<br>- Brief Summary of the Invention<br>- Brief Description of the Drawings (if filed)<br>- Detailed Description<br>- Claim(s)<br>- Abstract of the Disclosure<br>4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets <b>35</b> ]<br>5. Oath or Declaration [Total Sheets <b>1</b> ]<br>a. <input checked="" type="checkbox"/> Newly executed (original or copy)<br>b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d))<br><i>(for continuation/divisional with Box 18 completed)</i><br>i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b><br>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).<br>6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76 |   | 7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program <i>(Appendix)</i><br>8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i><br>a. <input type="checkbox"/> Computer Readable Form (CRF)<br>b. Specification Sequence Listing on:<br>i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> Paper<br>c. <input type="checkbox"/> Statements verifying identity of above copies<br><b>ACCOMPANYING APPLICATION PARTS</b><br>9. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))<br>10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney<br><i>(when there is an assignee)</i><br>11. <input type="checkbox"/> English Translation Document <i>(if applicable)</i><br>12. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations<br>13. <input type="checkbox"/> Preliminary Amendment<br>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)<br><i>(Should be specifically itemized)</i><br>15. <input checked="" type="checkbox"/> Certified Copy of Priority Document(s)<br><i>(if foreign priority is claimed)</i><br>16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i).<br>Applicant must attach form PTO/SB/35 or its equivalent.<br>17. <input type="checkbox"/> Other: |  |
| 18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:<br><input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No.: _____<br>Prior application information: Examiner _____ Art Unit: _____<br><b>For CONTINUATION OR DIVISIONAL APPS only:</b> The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts.  |   |  |  |
| <b>19. CORRESPONDENCE ADDRESS</b>  |   |  |  |
| <input checked="" type="checkbox"/> Customer Number: <b>32172</b> <input checked="" type="checkbox"/> Correspondence address below   |   |  |  |
| <b>Name</b> DICKSTEIN SHAPIRO MORIN & OSHINSKY LLP   |   |  |  |
| <b>Address</b> 1177 Avenue of the Americas<br>41st Floor   |   |  |  |
| <b>City</b>  | <b>New York</b>   | <b>State</b>   | <b>NY</b>                                |
| <b>Zip Code</b>  | <b>10036-2714</b>   |  |  |
| <b>Country</b>   | <b>US</b>   | <b>Telephone</b>   | <b>(212) 835-1400</b>                    |
|  |   | <b>Fax</b>   | <b>(212) 997-9880</b>                    |
| <b>Name (Print/Type)</b>   | <b>Mark J. Thronson</b>   |  | <b>Registration No. (Attorney/Agent)</b> |
|  |   |  | <b>33,082</b>                            |
| <b>Signature</b>   |  |  | <b>Date</b>                              |
|  |   |  | <b>December 5, 2003</b>                  |

| FEE TRANSMITTAL<br>for FY 2004   |  | Complete if Known    |                       |
|--|--|----------------------|-----------------------|
| Effective 10/01/2003, Patent fees are subject to annual revision.              |  | Application Number   | Not Yet Assigned      |
|  |  | Filing Date          | Concurrently Herewith |
|  |  | First Named Inventor | Yoshinori Watanabe    |
|  |  | Examiner Name        | Not Yet Assigned      |
|  |  | Art Unit             | N/A                   |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27 |  | Attorney Docket No.  | U2054.0145            |
| <b>TOTAL AMOUNT OF PAYMENT</b> (\$) <b>936.00</b>                              |  |                      |                       |

| METHOD OF PAYMENT (check all that apply)   | FEE CALCULATION (continued)  |              |          |  |                |                 |          |          |          |          |          |      |     |      |     |                                     |        |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                          |        |      |        |   |        |              |     |         |    |  |                |       |     |        |                    |   |        |      |     |      |     |  |      |                    |       |      |     |   |  |      |       |      |              |  |              |      |                 |          |          |                  |          |          |      |      |      |  |                        |      |      |      |      |                          |                                   |      |       |      |       |   |                                       |      |      |      |      |                                  |  |      |       |      |      |                                    |  |      |                          |      |     |                                |  |        |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                          |       |
|--|--|--------------|----------|--|----------------|-----------------|----------|----------|----------|----------|----------|------|-----|------|-----|-------------------------------------|--------|------|-----|------|-----|---|--|------|-----|------|-----|---------------------------|--|------|-------|------|-------|--|--|------|------|------|------|--|--|--------------------------|--------|------|--------|---|--------|--------------|-----|---------|----|--|----------------|-------|-----|--------|--------------------|---|--------|------|-----|------|-----|--|------|--------------------|-------|------|-----|---|--|------|-------|------|--------------|--|--------------|------|-----------------|----------|----------|------------------|----------|----------|------|------|------|--|------------------------|------|------|------|------|--------------------------|-----------------------------------|------|-------|------|-------|---|---------------------------------------|------|------|------|------|----------------------------------|--|------|-------|------|------|------------------------------------|--|------|--------------------------|------|-----|--------------------------------|--|--------|-----|------|-----|------------------|--|------|-----|------|-----|-----------------|--|------|-----|------|-----|-------------------------------|--|------|----|------|----|-------------------------------------|--|------|-----|------|-----|---|--|------|----|------|----|--|-------|------|-----|------|-----|---|--|------|-----|------|-----|--|--|------|-----|------|-----|---|--|------|-----|------|-----|---|--|---------------------------|--|--|--|--|--|-----------------------------------|--|--|--|--------------------------|-------|
| <input type="checkbox"/> Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None<br><input checked="" type="checkbox"/> Deposit Account:<br>Deposit Account Number: <span style="border: 1px solid black; padding: 2px;">50-2215</span><br>Deposit Account Name: <span style="border: 1px solid black; padding: 2px;">Dickstein Shapiro Morin &amp; Oshinsky LLP</span><br>The Director is authorized to: (check all that apply)<br><input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments<br><input checked="" type="checkbox"/> Charge any additional fee(s) or any underpayment of fee(s)<br><input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.  | <b>3. ADDITIONAL FEES</b><br><table border="1" style="width: 100%; border-collapse: collapse; font-size: 0.8em;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1051</td><td>130</td><td>2051</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>1052</td><td>50</td><td>2052</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet.</td><td></td></tr> <tr><td>1053</td><td>130</td><td>1053</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>1812</td><td>2,520</td><td>1812</td><td>2,520</td><td>For filing a request for <i>ex parte</i> reexamination</td><td></td></tr> <tr><td>1804</td><td>920*</td><td>1804</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr> <tr><td>1805</td><td>1,840*</td><td>1805</td><td>1,840*</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr> <tr><td>1251</td><td>110</td><td>2251</td><td>55</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>1252</td><td>420</td><td>2252</td><td>210</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>1253</td><td>950</td><td>2253</td><td>475</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>1254</td><td>1,480</td><td>2254</td><td>740</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>1255</td><td>2,010</td><td>2255</td><td>1,005</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>1401</td><td>330</td><td>2401</td><td>165</td><td>Notice of Appeal</td><td></td></tr> <tr><td>1402</td><td>330</td><td>2402</td><td>165</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>1403</td><td>290</td><td>2403</td><td>145</td><td>Request for oral hearing</td><td></td></tr> <tr><td>1451</td><td>1,510</td><td>1451</td><td>1,510</td><td>Petition to institute a public use proceeding</td><td></td></tr> <tr><td>1452</td><td>110</td><td>2452</td><td>55</td><td>Petition to revive - unavoidable</td><td></td></tr> <tr><td>1453</td><td>1,330</td><td>2453</td><td>665</td><td>Petition to revive - unintentional</td><td></td></tr> <tr><td>1501</td><td>1,330</td><td>2501</td><td>665</td><td>Utility issue fee (or reissue)</td><td></td></tr> <tr><td>1502</td><td>480</td><td>2502</td><td>240</td><td>Design issue fee</td><td></td></tr> <tr><td>1503</td><td>640</td><td>2503</td><td>320</td><td>Plant issue fee</td><td></td></tr> <tr><td>1460</td><td>130</td><td>1460</td><td>130</td><td>Petitions to the Commissioner</td><td></td></tr> <tr><td>1807</td><td>50</td><td>1807</td><td>50</td><td>Processing fee under 37 CFR 1.17(q)</td><td></td></tr> <tr><td>1806</td><td>180</td><td>1806</td><td>180</td><td>Submission of Information Disclosure Stmt</td><td></td></tr> <tr><td>8021</td><td>40</td><td>8021</td><td>40</td><td>Recording each patent assignment per property (times number of properties)</td><td>40.00</td></tr> <tr><td>1809</td><td>770</td><td>2809</td><td>385</td><td>Filing a submission after final rejection (37 CFR 1.129(a))</td><td></td></tr> <tr><td>1810</td><td>770</td><td>2810</td><td>385</td><td>For each additional invention to be examined (37 CFR 1.129(b))</td><td></td></tr> <tr><td>1801</td><td>770</td><td>2801</td><td>385</td><td>Request for Continued Examination (RCE)</td><td></td></tr> <tr><td>1802</td><td>900</td><td>1802</td><td>900</td><td>Request for expedited examination of a design application</td><td></td></tr> <tr> <td colspan="4">Other fee (specify) _____</td> <td></td> <td></td> </tr> <tr> <td colspan="4">*Reduced by Basic Filing Fee Paid</td> <td><b>SUBTOTAL (3)</b> (\$)</td> <td>40.00</td> </tr> </tbody> </table> | Large Entity |          | Small Entity   |                | Fee Description | Fee Paid | Fee Code | Fee (\$) | Fee Code | Fee (\$) | 1051 | 130 | 2051 | 65  | Surcharge - late filing fee or oath |        | 1052 | 50  | 2052 | 25  | Surcharge - late provisional filing fee or cover sheet. |  | 1053 | 130 | 1053 | 130 | Non-English specification |  | 1812 | 2,520 | 1812 | 2,520 | For filing a request for <i>ex parte</i> reexamination |  | 1804 | 920* | 1804 | 920* | Requesting publication of SIR prior to Examiner action |  | 1805                     | 1,840* | 1805 | 1,840* | Requesting publication of SIR after Examiner action |        | 1251         | 110 | 2251    | 55 | Extension for reply within first month |                | 1252  | 420 | 2252   | 210                | Extension for reply within second month |        | 1253 | 950 | 2253 | 475 | Extension for reply within third month |      | 1254               | 1,480 | 2254 | 740 | Extension for reply within fourth month |  | 1255 | 2,010 | 2255 | 1,005        | Extension for reply within fifth month |              | 1401 | 330             | 2401     | 165      | Notice of Appeal |          | 1402     | 330  | 2402 | 165  | Filing a brief in support of an appeal |                        | 1403 | 290  | 2403 | 145  | Request for oral hearing |                                   | 1451 | 1,510 | 1451 | 1,510 | Petition to institute a public use proceeding |                                       | 1452 | 110  | 2452 | 55   | Petition to revive - unavoidable |  | 1453 | 1,330 | 2453 | 665  | Petition to revive - unintentional |  | 1501 | 1,330                    | 2501 | 665 | Utility issue fee (or reissue) |  | 1502   | 480 | 2502 | 240 | Design issue fee |  | 1503 | 640 | 2503 | 320 | Plant issue fee |  | 1460 | 130 | 1460 | 130 | Petitions to the Commissioner |  | 1807 | 50 | 1807 | 50 | Processing fee under 37 CFR 1.17(q) |  | 1806 | 180 | 1806 | 180 | Submission of Information Disclosure Stmt |  | 8021 | 40 | 8021 | 40 | Recording each patent assignment per property (times number of properties) | 40.00 | 1809 | 770 | 2809 | 385 | Filing a submission after final rejection (37 CFR 1.129(a)) |  | 1810 | 770 | 2810 | 385 | For each additional invention to be examined (37 CFR 1.129(b)) |  | 1801 | 770 | 2801 | 385 | Request for Continued Examination (RCE) |  | 1802 | 900 | 1802 | 900 | Request for expedited examination of a design application |  | Other fee (specify) _____ |  |  |  |  |  | *Reduced by Basic Filing Fee Paid |  |  |  | <b>SUBTOTAL (3)</b> (\$) | 40.00 |
| Large Entity   |  | Small Entity |          | Fee Description  | Fee Paid       |                 |          |          |          |          |          |      |     |      |     |                                     |        |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                          |        |      |        |   |        |              |     |         |    |  |                |       |     |        |                    |   |        |      |     |      |     |  |      |                    |       |      |     |   |  |      |       |      |              |  |              |      |                 |          |          |                  |          |          |      |      |      |  |                        |      |      |      |      |                          |                                   |      |       |      |       |   |                                       |      |      |      |      |                                  |  |      |       |      |      |                                    |  |      |                          |      |     |                                |  |        |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                          |       |
| Fee Code   | Fee (\$)   | Fee Code     | Fee (\$) |  |                |                 |          |          |          |          |          |      |     |      |     |                                     |        |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                          |        |      |        |   |        |              |     |         |    |  |                |       |     |        |                    |   |        |      |     |      |     |  |      |                    |       |      |     |   |  |      |       |      |              |  |              |      |                 |          |          |                  |          |          |      |      |      |  |                        |      |      |      |      |                          |                                   |      |       |      |       |   |                                       |      |      |      |      |                                  |  |      |       |      |      |                                    |  |      |                          |      |     |                                |  |        |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                          |       |
| 1051   | 130  | 2051         | 65       | Surcharge - late filing fee or oath  |                |                 |          |          |          |          |          |      |     |      |     |                                     |        |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                          |        |      |        |   |        |              |     |         |    |  |                |       |     |        |                    |   |        |      |     |      |     |  |      |                    |       |      |     |   |  |      |       |      |              |  |              |      |                 |          |          |                  |          |          |      |      |      |  |                        |      |      |      |      |                          |                                   |      |       |      |       |   |                                       |      |      |      |      |                                  |  |      |       |      |      |                                    |  |      |                          |      |     |                                |  |        |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                          |       |
| 1052   | 50   | 2052         | 25       | Surcharge - late provisional filing fee or cover sheet.                    |                |                 |          |          |          |          |          |      |     |      |     |                                     |        |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                          |        |      |        |   |        |              |     |         |    |  |                |       |     |        |                    |   |        |      |     |      |     |  |      |                    |       |      |     |   |  |      |       |      |              |  |              |      |                 |          |          |                  |          |          |      |      |      |  |                        |      |      |      |      |                          |                                   |      |       |      |       |   |                                       |      |      |      |      |                                  |  |      |       |      |      |                                    |  |      |                          |      |     |                                |  |        |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                          |       |
| 1053   | 130  | 1053         | 130      | Non-English specification  |                |                 |          |          |          |          |          |      |     |      |     |                                     |        |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                          |        |      |        |   |        |              |     |         |    |  |                |       |     |        |                    |   |        |      |     |      |     |  |      |                    |       |      |     |   |  |      |       |      |              |  |              |      |                 |          |          |                  |          |          |      |      |      |  |                        |      |      |      |      |                          |                                   |      |       |      |       |   |                                       |      |      |      |      |                                  |  |      |       |      |      |                                    |  |      |                          |      |     |                                |  |        |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                          |       |
| 1812   | 2,520  | 1812         | 2,520    | For filing a request for <i>ex parte</i> reexamination                     |                |                 |          |          |          |          |          |      |     |      |     |                                     |        |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                          |        |      |        |   |        |              |     |         |    |  |                |       |     |        |                    |   |        |      |     |      |     |  |      |                    |       |      |     |   |  |      |       |      |              |  |              |      |                 |          |          |                  |          |          |      |      |      |  |                        |      |      |      |      |                          |                                   |      |       |      |       |   |                                       |      |      |      |      |                                  |  |      |       |      |      |                                    |  |      |                          |      |     |                                |  |        |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                          |       |
| 1804   | 920*   | 1804         | 920*     | Requesting publication of SIR prior to Examiner action                     |                |                 |          |          |          |          |          |      |     |      |     |                                     |        |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                          |        |      |        |   |        |              |     |         |    |  |                |       |     |        |                    |   |        |      |     |      |     |  |      |                    |       |      |     |   |  |      |       |      |              |  |              |      |                 |          |          |                  |          |          |      |      |      |  |                        |      |      |      |      |                          |                                   |      |       |      |       |   |                                       |      |      |      |      |                                  |  |      |       |      |      |                                    |  |      |                          |      |     |                                |  |        |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                          |       |
| 1805   | 1,840*   | 1805         | 1,840*   | Requesting publication of SIR after Examiner action                        |                |                 |          |          |          |          |          |      |     |      |     |                                     |        |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                          |        |      |        |   |        |              |     |         |    |  |                |       |     |        |                    |   |        |      |     |      |     |  |      |                    |       |      |     |   |  |      |       |      |              |  |              |      |                 |          |          |                  |          |          |      |      |      |  |                        |      |      |      |      |                          |                                   |      |       |      |       |   |                                       |      |      |      |      |                                  |  |      |       |      |      |                                    |  |      |                          |      |     |                                |  |        |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                          |       |
| 1251   | 110  | 2251         | 55       | Extension for reply within first month                                     |                |                 |          |          |          |          |          |      |     |      |     |                                     |        |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                          |        |      |        |   |        |              |     |         |    |  |                |       |     |        |                    |   |        |      |     |      |     |  |      |                    |       |      |     |   |  |      |       |      |              |  |              |      |                 |          |          |                  |          |          |      |      |      |  |                        |      |      |      |      |                          |                                   |      |       |      |       |   |                                       |      |      |      |      |                                  |  |      |       |      |      |                                    |  |      |                          |      |     |                                |  |        |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                          |       |
| 1252   | 420  | 2252         | 210      | Extension for reply within second month                                    |                |                 |          |          |          |          |          |      |     |      |     |                                     |        |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                          |        |      |        |   |        |              |     |         |    |  |                |       |     |        |                    |   |        |      |     |      |     |  |      |                    |       |      |     |   |  |      |       |      |              |  |              |      |                 |          |          |                  |          |          |      |      |      |  |                        |      |      |      |      |                          |                                   |      |       |      |       |   |                                       |      |      |      |      |                                  |  |      |       |      |      |                                    |  |      |                          |      |     |                                |  |        |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                          |       |
| 1253   | 950  | 2253         | 475      | Extension for reply within third month                                     |                |                 |          |          |          |          |          |      |     |      |     |                                     |        |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                          |        |      |        |   |        |              |     |         |    |  |                |       |     |        |                    |   |        |      |     |      |     |  |      |                    |       |      |     |   |  |      |       |      |              |  |              |      |                 |          |          |                  |          |          |      |      |      |  |                        |      |      |      |      |                          |                                   |      |       |      |       |   |                                       |      |      |      |      |                                  |  |      |       |      |      |                                    |  |      |                          |      |     |                                |  |        |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                          |       |
| 1254   | 1,480  | 2254         | 740      | Extension for reply within fourth month                                    |                |                 |          |          |          |          |          |      |     |      |     |                                     |        |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                          |        |      |        |   |        |              |     |         |    |  |                |       |     |        |                    |   |        |      |     |      |     |  |      |                    |       |      |     |   |  |      |       |      |              |  |              |      |                 |          |          |                  |          |          |      |      |      |  |                        |      |      |      |      |                          |                                   |      |       |      |       |   |                                       |      |      |      |      |                                  |  |      |       |      |      |                                    |  |      |                          |      |     |                                |  |        |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                          |       |
| 1255   | 2,010  | 2255         | 1,005    | Extension for reply within fifth month                                     |                |                 |          |          |          |          |          |      |     |      |     |                                     |        |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                          |        |      |        |   |        |              |     |         |    |  |                |       |     |        |                    |   |        |      |     |      |     |  |      |                    |       |      |     |   |  |      |       |      |              |  |              |      |                 |          |          |                  |          |          |      |      |      |  |                        |      |      |      |      |                          |                                   |      |       |      |       |   |                                       |      |      |      |      |                                  |  |      |       |      |      |                                    |  |      |                          |      |     |                                |  |        |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                          |       |
| 1401   | 330  | 2401         | 165      | Notice of Appeal   |                |                 |          |          |          |          |          |      |     |      |     |                                     |        |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                          |        |      |        |   |        |              |     |         |    |  |                |       |     |        |                    |   |        |      |     |      |     |  |      |                    |       |      |     |   |  |      |       |      |              |  |              |      |                 |          |          |                  |          |          |      |      |      |  |                        |      |      |      |      |                          |                                   |      |       |      |       |   |                                       |      |      |      |      |                                  |  |      |       |      |      |                                    |  |      |                          |      |     |                                |  |        |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                          |       |
| 1402   | 330  | 2402         | 165      | Filing a brief in support of an appeal                                     |                |                 |          |          |          |          |          |      |     |      |     |                                     |        |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                          |        |      |        |   |        |              |     |         |    |  |                |       |     |        |                    |   |        |      |     |      |     |  |      |                    |       |      |     |   |  |      |       |      |              |  |              |      |                 |          |          |                  |          |          |      |      |      |  |                        |      |      |      |      |                          |                                   |      |       |      |       |   |                                       |      |      |      |      |                                  |  |      |       |      |      |                                    |  |      |                          |      |     |                                |  |        |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                          |       |
| 1403   | 290  | 2403         | 145      | Request for oral hearing   |                |                 |          |          |          |          |          |      |     |      |     |                                     |        |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                          |        |      |        |   |        |              |     |         |    |  |                |       |     |        |                    |   |        |      |     |      |     |  |      |                    |       |      |     |   |  |      |       |      |              |  |              |      |                 |          |          |                  |          |          |      |      |      |  |                        |      |      |      |      |                          |                                   |      |       |      |       |   |                                       |      |      |      |      |                                  |  |      |       |      |      |                                    |  |      |                          |      |     |                                |  |        |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                          |       |
| 1451   | 1,510  | 1451         | 1,510    | Petition to institute a public use proceeding                              |                |                 |          |          |          |          |          |      |     |      |     |                                     |        |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                          |        |      |        |   |        |              |     |         |    |  |                |       |     |        |                    |   |        |      |     |      |     |  |      |                    |       |      |     |   |  |      |       |      |              |  |              |      |                 |          |          |                  |          |          |      |      |      |  |                        |      |      |      |      |                          |                                   |      |       |      |       |   |                                       |      |      |      |      |                                  |  |      |       |      |      |                                    |  |      |                          |      |     |                                |  |        |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                          |       |
| 1452   | 110  | 2452         | 55       | Petition to revive - unavoidable   |                |                 |          |          |          |          |          |      |     |      |     |                                     |        |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                          |        |      |        |   |        |              |     |         |    |  |                |       |     |        |                    |   |        |      |     |      |     |  |      |                    |       |      |     |   |  |      |       |      |              |  |              |      |                 |          |          |                  |          |          |      |      |      |  |                        |      |      |      |      |                          |                                   |      |       |      |       |   |                                       |      |      |      |      |                                  |  |      |       |      |      |                                    |  |      |                          |      |     |                                |  |        |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                          |       |
| 1453   | 1,330  | 2453         | 665      | Petition to revive - unintentional   |                |                 |          |          |          |          |          |      |     |      |     |                                     |        |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                          |        |      |        |   |        |              |     |         |    |  |                |       |     |        |                    |   |        |      |     |      |     |  |      |                    |       |      |     |   |  |      |       |      |              |  |              |      |                 |          |          |                  |          |          |      |      |      |  |                        |      |      |      |      |                          |                                   |      |       |      |       |   |                                       |      |      |      |      |                                  |  |      |       |      |      |                                    |  |      |                          |      |     |                                |  |        |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                          |       |
| 1501   | 1,330  | 2501         | 665      | Utility issue fee (or reissue)   |                |                 |          |          |          |          |          |      |     |      |     |                                     |        |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                          |        |      |        |   |        |              |     |         |    |  |                |       |     |        |                    |   |        |      |     |      |     |  |      |                    |       |      |     |   |  |      |       |      |              |  |              |      |                 |          |          |                  |          |          |      |      |      |  |                        |      |      |      |      |                          |                                   |      |       |      |       |   |                                       |      |      |      |      |                                  |  |      |       |      |      |                                    |  |      |                          |      |     |                                |  |        |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                          |       |
| 1502   | 480  | 2502         | 240      | Design issue fee   |                |                 |          |          |          |          |          |      |     |      |     |                                     |        |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                          |        |      |        |   |        |              |     |         |    |  |                |       |     |        |                    |   |        |      |     |      |     |  |      |                    |       |      |     |   |  |      |       |      |              |  |              |      |                 |          |          |                  |          |          |      |      |      |  |                        |      |      |      |      |                          |                                   |      |       |      |       |   |                                       |      |      |      |      |                                  |  |      |       |      |      |                                    |  |      |                          |      |     |                                |  |        |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                          |       |
| 1503   | 640  | 2503         | 320      | Plant issue fee  |                |                 |          |          |          |          |          |      |     |      |     |                                     |        |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                          |        |      |        |   |        |              |     |         |    |  |                |       |     |        |                    |   |        |      |     |      |     |  |      |                    |       |      |     |   |  |      |       |      |              |  |              |      |                 |          |          |                  |          |          |      |      |      |  |                        |      |      |      |      |                          |                                   |      |       |      |       |   |                                       |      |      |      |      |                                  |  |      |       |      |      |                                    |  |      |                          |      |     |                                |  |        |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                          |       |
| 1460   | 130  | 1460         | 130      | Petitions to the Commissioner  |                |                 |          |          |          |          |          |      |     |      |     |                                     |        |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                          |        |      |        |   |        |              |     |         |    |  |                |       |     |        |                    |   |        |      |     |      |     |  |      |                    |       |      |     |   |  |      |       |      |              |  |              |      |                 |          |          |                  |          |          |      |      |      |  |                        |      |      |      |      |                          |                                   |      |       |      |       |   |                                       |      |      |      |      |                                  |  |      |       |      |      |                                    |  |      |                          |      |     |                                |  |        |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                          |       |
| 1807   | 50   | 1807         | 50       | Processing fee under 37 CFR 1.17(q)  |                |                 |          |          |          |          |          |      |     |      |     |                                     |        |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                          |        |      |        |   |        |              |     |         |    |  |                |       |     |        |                    |   |        |      |     |      |     |  |      |                    |       |      |     |   |  |      |       |      |              |  |              |      |                 |          |          |                  |          |          |      |      |      |  |                        |      |      |      |      |                          |                                   |      |       |      |       |   |                                       |      |      |      |      |                                  |  |      |       |      |      |                                    |  |      |                          |      |     |                                |  |        |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                          |       |
| 1806   | 180  | 1806         | 180      | Submission of Information Disclosure Stmt                                  |                |                 |          |          |          |          |          |      |     |      |     |                                     |        |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                          |        |      |        |   |        |              |     |         |    |  |                |       |     |        |                    |   |        |      |     |      |     |  |      |                    |       |      |     |   |  |      |       |      |              |  |              |      |                 |          |          |                  |          |          |      |      |      |  |                        |      |      |      |      |                          |                                   |      |       |      |       |   |                                       |      |      |      |      |                                  |  |      |       |      |      |                                    |  |      |                          |      |     |                                |  |        |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                          |       |
| 8021   | 40   | 8021         | 40       | Recording each patent assignment per property (times number of properties) | 40.00          |                 |          |          |          |          |          |      |     |      |     |                                     |        |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                          |        |      |        |   |        |              |     |         |    |  |                |       |     |        |                    |   |        |      |     |      |     |  |      |                    |       |      |     |   |  |      |       |      |              |  |              |      |                 |          |          |                  |          |          |      |      |      |  |                        |      |      |      |      |                          |                                   |      |       |      |       |   |                                       |      |      |      |      |                                  |  |      |       |      |      |                                    |  |      |                          |      |     |                                |  |        |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                          |       |
| 1809   | 770  | 2809         | 385      | Filing a submission after final rejection (37 CFR 1.129(a))                |                |                 |          |          |          |          |          |      |     |      |     |                                     |        |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                          |        |      |        |   |        |              |     |         |    |  |                |       |     |        |                    |   |        |      |     |      |     |  |      |                    |       |      |     |   |  |      |       |      |              |  |              |      |                 |          |          |                  |          |          |      |      |      |  |                        |      |      |      |      |                          |                                   |      |       |      |       |   |                                       |      |      |      |      |                                  |  |      |       |      |      |                                    |  |      |                          |      |     |                                |  |        |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                          |       |
| 1810   | 770  | 2810         | 385      | For each additional invention to be examined (37 CFR 1.129(b))             |                |                 |          |          |          |          |          |      |     |      |     |                                     |        |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                          |        |      |        |   |        |              |     |         |    |  |                |       |     |        |                    |   |        |      |     |      |     |  |      |                    |       |      |     |   |  |      |       |      |              |  |              |      |                 |          |          |                  |          |          |      |      |      |  |                        |      |      |      |      |                          |                                   |      |       |      |       |   |                                       |      |      |      |      |                                  |  |      |       |      |      |                                    |  |      |                          |      |     |                                |  |        |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                          |       |
| 1801   | 770  | 2801         | 385      | Request for Continued Examination (RCE)                                    |                |                 |          |          |          |          |          |      |     |      |     |                                     |        |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                          |        |      |        |   |        |              |     |         |    |  |                |       |     |        |                    |   |        |      |     |      |     |  |      |                    |       |      |     |   |  |      |       |      |              |  |              |      |                 |          |          |                  |          |          |      |      |      |  |                        |      |      |      |      |                          |                                   |      |       |      |       |   |                                       |      |      |      |      |                                  |  |      |       |      |      |                                    |  |      |                          |      |     |                                |  |        |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                          |       |
| 1802   | 900  | 1802         | 900      | Request for expedited examination of a design application                  |                |                 |          |          |          |          |          |      |     |      |     |                                     |        |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                          |        |      |        |   |        |              |     |         |    |  |                |       |     |        |                    |   |        |      |     |      |     |  |      |                    |       |      |     |   |  |      |       |      |              |  |              |      |                 |          |          |                  |          |          |      |      |      |  |                        |      |      |      |      |                          |                                   |      |       |      |       |   |                                       |      |      |      |      |                                  |  |      |       |      |      |                                    |  |      |                          |      |     |                                |  |        |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                          |       |
| Other fee (specify) _____  |  |              |          |  |                |                 |          |          |          |          |          |      |     |      |     |                                     |        |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                          |        |      |        |   |        |              |     |         |    |  |                |       |     |        |                    |   |        |      |     |      |     |  |      |                    |       |      |     |   |  |      |       |      |              |  |              |      |                 |          |          |                  |          |          |      |      |      |  |                        |      |      |      |      |                          |                                   |      |       |      |       |   |                                       |      |      |      |      |                                  |  |      |       |      |      |                                    |  |      |                          |      |     |                                |  |        |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                          |       |
| *Reduced by Basic Filing Fee Paid  |  |              |          | <b>SUBTOTAL (3)</b> (\$)   | 40.00          |                 |          |          |          |          |          |      |     |      |     |                                     |        |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                          |        |      |        |   |        |              |     |         |    |  |                |       |     |        |                    |   |        |      |     |      |     |  |      |                    |       |      |     |   |  |      |       |      |              |  |              |      |                 |          |          |                  |          |          |      |      |      |  |                        |      |      |      |      |                          |                                   |      |       |      |       |   |                                       |      |      |      |      |                                  |  |      |       |      |      |                                    |  |      |                          |      |     |                                |  |        |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                          |       |
| <b>1. BASIC FILING FEE</b><br><table border="1" style="width: 100%; border-collapse: collapse; font-size: 0.8em;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1001</td><td>770</td><td>2001</td><td>385</td><td>Utility filing fee</td><td>770.00</td></tr> <tr><td>1002</td><td>340</td><td>2002</td><td>170</td><td>Design filing fee</td><td></td></tr> <tr><td>1003</td><td>530</td><td>2003</td><td>265</td><td>Plant filing fee</td><td></td></tr> <tr><td>1004</td><td>770</td><td>2004</td><td>385</td><td>Reissue filing fee</td><td></td></tr> <tr><td>1005</td><td>160</td><td>2005</td><td>80</td><td>Provisional filing fee</td><td></td></tr> <tr> <td colspan="4"><b>SUBTOTAL (1)</b> (\$)</td> <td></td> <td>770.00</td> </tr> </tbody> </table><br><b>2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE</b><br><table border="1" style="width: 100%; border-collapse: collapse; font-size: 0.8em;"> <tr> <td>Total Claims</td> <td>27</td> <td>-20** =</td> <td>7</td> <td>x</td> <td>Fee from below</td> <td>18.00</td> <td>=</td> <td>126.00</td> </tr> <tr> <td>Independent Claims</td> <td>3</td> <td>-3** =</td> <td></td> <td>x</td> <td></td> <td></td> <td>=</td> <td>0.00</td> </tr> <tr> <td>Multiple Dependent</td> <td></td> <td></td> <td></td> <td>x</td> <td></td> <td></td> <td>=</td> <td></td> </tr> </table><br><table border="1" style="width: 100%; border-collapse: collapse; font-size: 0.8em;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1202</td><td>18</td><td>2202</td><td>9</td><td>Claims in excess of 20</td><td></td></tr> <tr><td>1201</td><td>86</td><td>2201</td><td>43</td><td>Independent claims in excess of 3</td><td></td></tr> <tr><td>1203</td><td>290</td><td>2203</td><td>145</td><td>Multiple dependent claim, if not paid</td><td></td></tr> <tr><td>1204</td><td>86</td><td>2204</td><td>43</td><td>** Reissue independent claims over original patent</td><td></td></tr> <tr><td>1205</td><td>18</td><td>2205</td><td>9</td><td>** Reissue claims in excess of 20 and over original patent</td><td></td></tr> <tr> <td colspan="4"><b>SUBTOTAL (2)</b> (\$)</td> <td></td> <td>126.00</td> </tr> </tbody> </table> <p style="font-size: 0.7em;">**or number previously paid, if greater; For Reissues, see above</p> |  | Large Entity |          | Small Entity   |                | Fee Description | Fee Paid | Fee Code | Fee (\$) | Fee Code | Fee (\$) | 1001 | 770 | 2001 | 385 | Utility filing fee                  | 770.00 | 1002 | 340 | 2002 | 170 | Design filing fee                                       |  | 1003 | 530 | 2003 | 265 | Plant filing fee          |  | 1004 | 770   | 2004 | 385   | Reissue filing fee                                     |  | 1005 | 160  | 2005 | 80   | Provisional filing fee                                 |  | <b>SUBTOTAL (1)</b> (\$) |        |      |        |   | 770.00 | Total Claims | 27  | -20** = | 7  | x                                      | Fee from below | 18.00 | =   | 126.00 | Independent Claims | 3                                       | -3** = |      | x   |      |     | =                                      | 0.00 | Multiple Dependent |       |      |     | x                                       |  |      | =     |      | Large Entity |  | Small Entity |      | Fee Description | Fee Paid | Fee Code | Fee (\$)         | Fee Code | Fee (\$) | 1202 | 18   | 2202 | 9                                      | Claims in excess of 20 |      | 1201 | 86   | 2201 | 43                       | Independent claims in excess of 3 |      | 1203  | 290  | 2203  | 145   | Multiple dependent claim, if not paid |      | 1204 | 86   | 2204 | 43                               | ** Reissue independent claims over original patent |      | 1205  | 18   | 2205 | 9                                  | ** Reissue claims in excess of 20 and over original patent |      | <b>SUBTOTAL (2)</b> (\$) |      |     |                                |  | 126.00 |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                          |       |
| Large Entity   |  | Small Entity |          | Fee Description  | Fee Paid       |                 |          |          |          |          |          |      |     |      |     |                                     |        |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                          |        |      |        |   |        |              |     |         |    |  |                |       |     |        |                    |   |        |      |     |      |     |  |      |                    |       |      |     |   |  |      |       |      |              |  |              |      |                 |          |          |                  |          |          |      |      |      |  |                        |      |      |      |      |                          |                                   |      |       |      |       |   |                                       |      |      |      |      |                                  |  |      |       |      |      |                                    |  |      |                          |      |     |                                |  |        |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                          |       |
| Fee Code   | Fee (\$)   | Fee Code     | Fee (\$) |  |                |                 |          |          |          |          |          |      |     |      |     |                                     |        |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                          |        |      |        |   |        |              |     |         |    |  |                |       |     |        |                    |   |        |      |     |      |     |  |      |                    |       |      |     |   |  |      |       |      |              |  |              |      |                 |          |          |                  |          |          |      |      |      |  |                        |      |      |      |      |                          |                                   |      |       |      |       |   |                                       |      |      |      |      |                                  |  |      |       |      |      |                                    |  |      |                          |      |     |                                |  |        |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                          |       |
| 1001   | 770  | 2001         | 385      | Utility filing fee   | 770.00         |                 |          |          |          |          |          |      |     |      |     |                                     |        |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                          |        |      |        |   |        |              |     |         |    |  |                |       |     |        |                    |   |        |      |     |      |     |  |      |                    |       |      |     |   |  |      |       |      |              |  |              |      |                 |          |          |                  |          |          |      |      |      |  |                        |      |      |      |      |                          |                                   |      |       |      |       |   |                                       |      |      |      |      |                                  |  |      |       |      |      |                                    |  |      |                          |      |     |                                |  |        |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                          |       |
| 1002   | 340  | 2002         | 170      | Design filing fee  |                |                 |          |          |          |          |          |      |     |      |     |                                     |        |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                          |        |      |        |   |        |              |     |         |    |  |                |       |     |        |                    |   |        |      |     |      |     |  |      |                    |       |      |     |   |  |      |       |      |              |  |              |      |                 |          |          |                  |          |          |      |      |      |  |                        |      |      |      |      |                          |                                   |      |       |      |       |   |                                       |      |      |      |      |                                  |  |      |       |      |      |                                    |  |      |                          |      |     |                                |  |        |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                          |       |
| 1003   | 530  | 2003         | 265      | Plant filing fee   |                |                 |          |          |          |          |          |      |     |      |     |                                     |        |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                          |        |      |        |   |        |              |     |         |    |  |                |       |     |        |                    |   |        |      |     |      |     |  |      |                    |       |      |     |   |  |      |       |      |              |  |              |      |                 |          |          |                  |          |          |      |      |      |  |                        |      |      |      |      |                          |                                   |      |       |      |       |   |                                       |      |      |      |      |                                  |  |      |       |      |      |                                    |  |      |                          |      |     |                                |  |        |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                          |       |
| 1004   | 770  | 2004         | 385      | Reissue filing fee   |                |                 |          |          |          |          |          |      |     |      |     |                                     |        |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                          |        |      |        |   |        |              |     |         |    |  |                |       |     |        |                    |   |        |      |     |      |     |  |      |                    |       |      |     |   |  |      |       |      |              |  |              |      |                 |          |          |                  |          |          |      |      |      |  |                        |      |      |      |      |                          |                                   |      |       |      |       |   |                                       |      |      |      |      |                                  |  |      |       |      |      |                                    |  |      |                          |      |     |                                |  |        |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                          |       |
| 1005   | 160  | 2005         | 80       | Provisional filing fee   |                |                 |          |          |          |          |          |      |     |      |     |                                     |        |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                          |        |      |        |   |        |              |     |         |    |  |                |       |     |        |                    |   |        |      |     |      |     |  |      |                    |       |      |     |   |  |      |       |      |              |  |              |      |                 |          |          |                  |          |          |      |      |      |  |                        |      |      |      |      |                          |                                   |      |       |      |       |   |                                       |      |      |      |      |                                  |  |      |       |      |      |                                    |  |      |                          |      |     |                                |  |        |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                          |       |
| <b>SUBTOTAL (1)</b> (\$)   |  |              |          |  | 770.00         |                 |          |          |          |          |          |      |     |      |     |                                     |        |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                          |        |      |        |   |        |              |     |         |    |  |                |       |     |        |                    |   |        |      |     |      |     |  |      |                    |       |      |     |   |  |      |       |      |              |  |              |      |                 |          |          |                  |          |          |      |      |      |  |                        |      |      |      |      |                          |                                   |      |       |      |       |   |                                       |      |      |      |      |                                  |  |      |       |      |      |                                    |  |      |                          |      |     |                                |  |        |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                          |       |
| Total Claims   | 27   | -20** =      | 7        | x  | Fee from below | 18.00           | =        | 126.00   |          |          |          |      |     |      |     |                                     |        |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                          |        |      |        |   |        |              |     |         |    |  |                |       |     |        |                    |   |        |      |     |      |     |  |      |                    |       |      |     |   |  |      |       |      |              |  |              |      |                 |          |          |                  |          |          |      |      |      |  |                        |      |      |      |      |                          |                                   |      |       |      |       |   |                                       |      |      |      |      |                                  |  |      |       |      |      |                                    |  |      |                          |      |     |                                |  |        |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                          |       |
| Independent Claims   | 3  | -3** =       |          | x  |                |                 | =        | 0.00     |          |          |          |      |     |      |     |                                     |        |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                          |        |      |        |   |        |              |     |         |    |  |                |       |     |        |                    |   |        |      |     |      |     |  |      |                    |       |      |     |   |  |      |       |      |              |  |              |      |                 |          |          |                  |          |          |      |      |      |  |                        |      |      |      |      |                          |                                   |      |       |      |       |   |                                       |      |      |      |      |                                  |  |      |       |      |      |                                    |  |      |                          |      |     |                                |  |        |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                          |       |
| Multiple Dependent   |  |              |          | x  |                |                 | =        |          |          |          |          |      |     |      |     |                                     |        |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                          |        |      |        |   |        |              |     |         |    |  |                |       |     |        |                    |   |        |      |     |      |     |  |      |                    |       |      |     |   |  |      |       |      |              |  |              |      |                 |          |          |                  |          |          |      |      |      |  |                        |      |      |      |      |                          |                                   |      |       |      |       |   |                                       |      |      |      |      |                                  |  |      |       |      |      |                                    |  |      |                          |      |     |                                |  |        |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                          |       |
| Large Entity   |  | Small Entity |          | Fee Description  | Fee Paid       |                 |          |          |          |          |          |      |     |      |     |                                     |        |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                          |        |      |        |   |        |              |     |         |    |  |                |       |     |        |                    |   |        |      |     |      |     |  |      |                    |       |      |     |   |  |      |       |      |              |  |              |      |                 |          |          |                  |          |          |      |      |      |  |                        |      |      |      |      |                          |                                   |      |       |      |       |   |                                       |      |      |      |      |                                  |  |      |       |      |      |                                    |  |      |                          |      |     |                                |  |        |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                          |       |
| Fee Code   | Fee (\$)   | Fee Code     | Fee (\$) |  |                |                 |          |          |          |          |          |      |     |      |     |                                     |        |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                          |        |      |        |   |        |              |     |         |    |  |                |       |     |        |                    |   |        |      |     |      |     |  |      |                    |       |      |     |   |  |      |       |      |              |  |              |      |                 |          |          |                  |          |          |      |      |      |  |                        |      |      |      |      |                          |                                   |      |       |      |       |   |                                       |      |      |      |      |                                  |  |      |       |      |      |                                    |  |      |                          |      |     |                                |  |        |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                          |       |
| 1202   | 18   | 2202         | 9        | Claims in excess of 20   |                |                 |          |          |          |          |          |      |     |      |     |                                     |        |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                          |        |      |        |   |        |              |     |         |    |  |                |       |     |        |                    |   |        |      |     |      |     |  |      |                    |       |      |     |   |  |      |       |      |              |  |              |      |                 |          |          |                  |          |          |      |      |      |  |                        |      |      |      |      |                          |                                   |      |       |      |       |   |                                       |      |      |      |      |                                  |  |      |       |      |      |                                    |  |      |                          |      |     |                                |  |        |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                          |       |
| 1201   | 86   | 2201         | 43       | Independent claims in excess of 3  |                |                 |          |          |          |          |          |      |     |      |     |                                     |        |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                          |        |      |        |   |        |              |     |         |    |  |                |       |     |        |                    |   |        |      |     |      |     |  |      |                    |       |      |     |   |  |      |       |      |              |  |              |      |                 |          |          |                  |          |          |      |      |      |  |                        |      |      |      |      |                          |                                   |      |       |      |       |   |                                       |      |      |      |      |                                  |  |      |       |      |      |                                    |  |      |                          |      |     |                                |  |        |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                          |       |
| 1203   | 290  | 2203         | 145      | Multiple dependent claim, if not paid                                      |                |                 |          |          |          |          |          |      |     |      |     |                                     |        |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                          |        |      |        |   |        |              |     |         |    |  |                |       |     |        |                    |   |        |      |     |      |     |  |      |                    |       |      |     |   |  |      |       |      |              |  |              |      |                 |          |          |                  |          |          |      |      |      |  |                        |      |      |      |      |                          |                                   |      |       |      |       |   |                                       |      |      |      |      |                                  |  |      |       |      |      |                                    |  |      |                          |      |     |                                |  |        |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                          |       |
| 1204   | 86   | 2204         | 43       | ** Reissue independent claims over original patent                         |                |                 |          |          |          |          |          |      |     |      |     |                                     |        |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                          |        |      |        |   |        |              |     |         |    |  |                |       |     |        |                    |   |        |      |     |      |     |  |      |                    |       |      |     |   |  |      |       |      |              |  |              |      |                 |          |          |                  |          |          |      |      |      |  |                        |      |      |      |      |                          |                                   |      |       |      |       |   |                                       |      |      |      |      |                                  |  |      |       |      |      |                                    |  |      |                          |      |     |                                |  |        |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                          |       |
| 1205   | 18   | 2205         | 9        | ** Reissue claims in excess of 20 and over original patent                 |                |                 |          |          |          |          |          |      |     |      |     |                                     |        |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                          |        |      |        |   |        |              |     |         |    |  |                |       |     |        |                    |   |        |      |     |      |     |  |      |                    |       |      |     |   |  |      |       |      |              |  |              |      |                 |          |          |                  |          |          |      |      |      |  |                        |      |      |      |      |                          |                                   |      |       |      |       |   |                                       |      |      |      |      |                                  |  |      |       |      |      |                                    |  |      |                          |      |     |                                |  |        |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                          |       |
| <b>SUBTOTAL (2)</b> (\$)   |  |              |          |  | 126.00         |                 |          |          |          |          |          |      |     |      |     |                                     |        |      |     |      |     |   |  |      |     |      |     |                           |  |      |       |      |       |  |  |      |      |      |      |  |  |                          |        |      |        |   |        |              |     |         |    |  |                |       |     |        |                    |   |        |      |     |      |     |  |      |                    |       |      |     |   |  |      |       |      |              |  |              |      |                 |          |          |                  |          |          |      |      |      |  |                        |      |      |      |      |                          |                                   |      |       |      |       |   |                                       |      |      |      |      |                                  |  |      |       |      |      |                                    |  |      |                          |      |     |                                |  |        |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |       |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |                           |  |  |  |  |  |                                   |  |  |  |                          |       |

| SUBMITTED BY      |                  | (Complete if applicable)          |                  |
|-------------------|------------------|-----------------------------------|------------------|
| Name (Print/Type) | Mark J. Thronson | Registration No. (Attorney/Agent) | 33,082           |
| Signature         |                  | Telephone                         | (212) 896-5470   |
|                   |                  | Date                              | December 5, 2003 |